

Work Order ID 92128

October-23-12 3:00:10 PM

92128

Page 1

Item ID: D2690-17 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Cable
 Start Date: 10/23/12 Start Qty: 10.00 ***10*** Cust Item ID:
 Required Date: 11/16/12 Req'd Qty: 10.00 ***10*** Customer:
 Reference:

Approvals: Process Plan: MLS Date: 12-10-24 Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D2690	Rev B2								
100	Small Fab	0.00							
100									
Small Fab	Memo	0.00							
Small Fab	Assemble as per Dwg D2690								
110	QC5- Inspect part completeness to step on W/O	0.00							
110									
QC	Memo	0.00							
Quality Control									
120	Identify as per dwg & Stock Location: <u>8176</u>	0.00							
120									
Packaging	Memo	0.00							
Packaging									

10x SP 12/10/30

DAS 15
12-10-31

10

10x SP 12-10-31

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY										
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 92128***92128***

Page 2

October-23-12 3:00:10 PM

Item ID: D2690-17

Accept

N9000040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Cable

Start Date: 10/23/12 Start Qty: 10.00

10

Cust Item ID:

Required Date: 11/16/12 Req'd Qty: 10.00

10

Customer:

Reference:

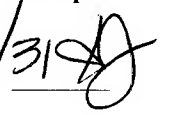
Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	QC21- Final Inspection - Work Order Release	0.00							
130									
QC	Memo	0.00							
Quality Control									

12/10/31 
MF
12-10-31

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

October-23-12 3:00:09 PM

Page 1

Work Order ID: 92128

Parent Item: D2690-17

Parent Item Name: Cable

Start Date: 10/23/12

Required Date: 11/16/12

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP: C01.08.24Removed Manufacturer Release CertificationSM/EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
CBL-1240 Cable		Purchased	No			100	f	1,047.3300	1.416	14.905263			
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				GA		1047.330041							
				113565		3.911789							
				119021		30.384852							
				119690		13.0334							
				122190		500							
				123283		500							
CBL-460 Loop Sleeve		Purchased	No			100	Each	536.0000	2	20			
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				GA		536							
				121574		136							
				123283		200							
				123389		200							

Handwritten signature and date: 10/30

Handwritten number: 14.905263

Handwritten signature and date: 10/30

Handwritten number: 20

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

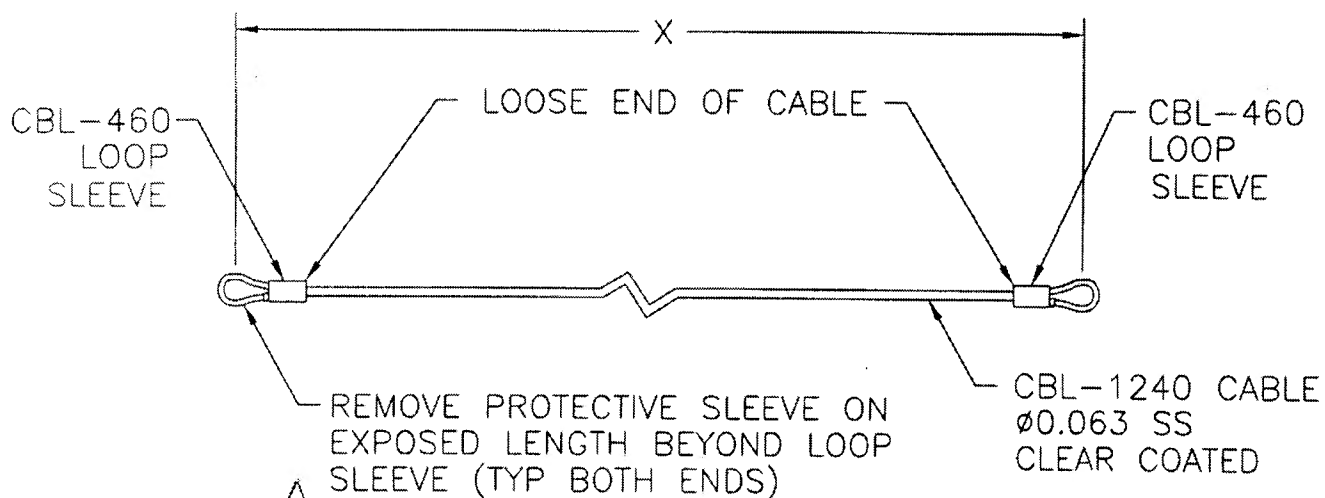
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Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
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DESIGN <i>MD</i>	DRAWN BY <i>KE</i>	DART AEROSPACE LTD VICTORIA INTERNATIONAL AIRPORT, CANADA	
CHECKED <i>MD</i>	APPROVED <i>BW</i>	DRAWING NO. D2690	REV. B SHEET 1 OF 1
DATE 97.10.02		TITLE LANYARD ASSEMBLY	SCALE NTS
A	97.07.03	NEW ISSUE	
B	97.10.02	REVISED NOTE FOR ADDITIONAL LENGTH	
B1	CP 01.08.20	ADD NOTE TO REMOVE 2.25" OF SLEEVE	
B2	CP 04.06.24	ADDED TOLERANCE	

RELEASED
971003 KE
TSR 4324



~~B1 REMOVE 2.25" OF SLEEVE EACH END~~

~~B2 REMOVE 2.12" MIN - 2.25" MAX OF SLEEVE EACH END~~

D2690-X

X = LENGTH IN INCHES

NOTE: CUT CABLE 2.50* INCHES LONGER THAN 'X' LENGTH. FOLD ENDS TIGHT TO 'X' LENGTH AND CRIMP WITH SLEEVE AT END OF LOOSE END OF CABLE WITH CBL-705 CRIMPING TOOL.
*ADDITIONAL LENGTH MAY BE NECESSARY IN SOME APPLICATIONS. CUT AS REQUIRED.

NOTE: IN SOME CASES, END HAS TO BE CRIMPED AFTER ASSEMBLY WITH ATTACHING PARTS.

NO. 92128 MTS
12-10-24
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STRICTLY FOR INFORMATION
WORK COPY
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DEO's